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HAY ASTHMA.

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IN June, 1852, I was consulted by a lady respecting a variety of disease, of which I had frequently read entertaining descriptions in books, but had never before been permitted to witness. I refer to what is commonly known as "hay asthma."

Nine years previously, at a period when innumerable flowers and grasses were appearing, and the air was laden with their aroma, the subject of this record was attacked with what was considered common catarrh, the intensity of which passed away, leaving the mucous membrane of the air-passages peculiarly susceptible to impressions of offending odors. During the summer of 1843, Mrs. B. suffered many repetitions of the catarrhal disease, which entirely disappeared after the first severe autumnal frost. Again, in the spring of 1844, on the expansion of vegetation, she experienced a return of the disorder, without for a moment imagining its re-appearance at that time as anything more than accidental, or ascribable to the changeable season and increased out-of-door employment. She was soon, however, taught by experience, that her sufferings were at all times increased by inhaling the odor of flowers, and found it decidedly painful and distressing to breathe the atmosphere of gardens and meadows. The advice of a physician in New Hampshire, where our patient resided, was sought, and all doubt concerning the nature and cause of her sickness was dispelled by his advice and information on the subject.

The following narration of the symptoms assumed in this interesting case, Mrs. B. has manifested during the spring and summer for nine successive years, and esteems her lot hard indeed, to be forbidden the pleasure of indulging her natural taste in the cultivation and arrangement of ornamental flowers and shrubs.

Early in June, frequently in May, as soon as roses and other highly odorous flowers appear, she is attacked with suffusion of the eyes, constant sneezing, accompanied by the escape of thin mucus from the nostrils—suffers exquisite pain, like neuralgia, in the orbits and brow—experiences a sensation of constriction in the chest, as if a band was tightly drawn around the waist—breathes hurriedly and anxiously—has a dry,

irritating cough, and for a longer or shorter time, depending on the continuance of the offending cause, is prostrated, confined to her bed, and wholly incapacitated from attending to her ordinary, or even commonest duties. In an hour or two, generally, there is an abatement of all the symptoms, the breathing becomes quiet and regular, the cough subsides, the feeling of suffocation is removed, and she experiences relief similar to that which follows or concludes an attack of spasmodic asthma, when the cough softens down, with an abundant and easily removed expectoration.

Paroxysms of this description were suffered in the morning, at noon, and in the evening, with great regularity, and with the single exception of the cough, a complete intermission occurred between them, and her mental and physical powers resumed again their wonted activity and vigor.

This disease or infliction is not confined to the summer months, but is developed in mid-winter and at other seasons, by inhaling the aroma of flowers. It so readily follows the least escape of floral perfume, that she cannot remain in an apartment in which flowers are preserved, as I had an opportunity of witnessing during an interview at my office. Although her evening paroxysm had subsided, and by avoiding exposure to the exciting cause of the dyspnœa, she hoped to escape further inconvenience during the remainder of the day; yet, after sitting a few minutes, I was compelled to remove from a table two or three rose-buds, which I had preserved in water, on account of the sudden development of an incessant, dry, hacking cough, similar to what she had often experienced on walking or riding through a garden.

The peculiarities of this case differ in no essential respects from the instances of the affection mentioned in works of practical medicine, and my purpose in presenting it to the Association, is to bear testimony to the efficiency of the remedy with which I succeeded in averting its disagreeable course.

The recurrence of the disease year after year, and its absolute dependence on the inhalation of gases developed by grasses and flowers, and its occasional production in the winter months, by exposure to the same irritating cause, suggested the propriety of removal from the country to the sea-shore, during the summer and early autumn months. A few years before, Mrs. B. availed herself of this promise of relief, and spent several weeks at the sea-side and on the water; but instead of yielding abatement to her sufferings, the sea air or some other agency considerably aggravated the disorder.

Considering this, it became necessary to prescribe for the relief of an affection developed and continued by a well-known though subtle cause, whose operations offered the strongest impediment to the successful employment of remedial agents. I advised avoidance, as completely as could be done, of localities highly charged with the odor of flowers and grasses, and gave hydrocyanic acid, in mucilage, to soothe and subdue the cough, which was the most prominent and troublesome symptom. Taking into consideration the *periodical* tendency of the disease, I did not besitate to recommend the liberal employment of quinine, or some pre-

paration of arsenic, should the prussic acid prove unavailing. The prescription was as follows: Mucilage, ʒ ij.; hydrocyanic acid, m. xxx.; M. Fifteen drops every two hours. Almost immediately after commencing its use, the cough yielded, and on the following day, no paroxysm of the dyspnœa returning, she felt greatly encouraged to continue the remedy. During the remainder of the summer, part of which she spent in Elmira, and part in New Hampshire, she experienced only the slightest inconvenience from the disease, though on many occasions she rode several miles in the country, and was frequently and variously exposed to the peculiar influences which, but a short time before, never failed to develope an attack. She was never without the remedy for a day, until cold weather set in, and used it with extreme faithfulness and confidence.

Hay fever, hay asthma, summer catarrh, and "sea-cold," as my patient designated her affection, or idiosyncrasy, is considered by Dr. Elliotson as a combination of catarrh and asthma, and by Dr. Dunglison is called a "singular variety of chronic bronchitis." It is oftentimes an hereditary disease, successively appearing in parent and child, and of all maladies, is, in particular instances, the most intractable. It is aggravated by the use of fruits, by exposure, not only to the offending and specific cause, but to extremes of temperature, by excitement of mind, &c. A case is related in Dunglison's Practice, on the authority of Mr. Poyan, in which all the symptoms of the disease were produced by the smell of a guinea-pig; and I once knew a gentleman who could not remain in an apartment in which apples were preserved, without experiencing dyspnœa, headache, constriction of the chest, and other unpleasant symptoms; and another instance of an individual to whom cheese was peculiarly obnoxious, on account of the production of the same phenomena.

Respecting the treatment of hay asthma, much has been written, and various methods have been proposed. Previous to an anticipated attack, the cold shower-bath has been found especially serviceable as a prophylactic, followed by quinine and sulphate of iron, according to the plan propounded by Mr. Gordon, an English writer. In speaking of this combination, he states that it proved "eminently successful in emancipating from this tormenting disorder, two patients, whose cases he had previously related; who, in spite of all other treatment, suffered an annual return of it for fifteen years." Chloride of lime was recommended by Dr. Elliotson, to a sufferer, on the principle of its efficiency in destroying *animal* effluvia, and liberal use was made of it in the sleeping-room and other apartments of the house, with complete success. "Three patients out of five derived advantage from it." Dr. Watson suggests a trial of the *respirator*, as a defence against particles of ipecacuanha, and against the volatile exciting cause (whatever it may be) of hay asthma.—*Transactions Med. Association Southern Central New York.*

ON DISEASES OF THE SKIN, IN REFERENCE TO THEIR CONSTITUTIONAL ORIGIN AND TREATMENT.

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THE phraseology of medical science has changed so much of late that the term *constitutional*, as applied to pathology, familiar as it has long been to the profession, may seem to require a definition. As applied to treatment its meaning is obvious enough, denoting some mode of relieving local disease other than the direct medication of the diseased structure; but a local disease can so seldom exist *per se*, independently of some lesion of the general system, that to argue in favor of the constitutional origin, or nature of any particular local affection, may seem superfluous. Strictly speaking, indeed, there is the same kind of relation between a pimple and the constitution, as between the leap of a grasshopper and the inertia of the earth: the insect kicks the earth from him as truly as he leaps away from the earth, although the one movement is sensible and appreciated, and the other only theoretical. If a child falls into a tub of hot water, the whole surface of the body is blistered. It is a local affection, but how soon do the symptoms show that it is one in which the whole system participates. A carbuncle, an eruption of smallpox, scarlatina or measles, and an attack of erysipelas or pemphigus, are all so many illustrations of the fully-admitted truth, that a severe affection of the skin, whether caused by accident or otherwise, involves the constitution in the general disturbance. In the milder forms of skin disease the general lesion may be less obvious, but, from analogy, we are bound to conclude that it exists. If a person is inoculated for smallpox, and but one pustule appears, that pustule is preceded and accompanied by some degree of pyrexia. Nor is it possible for a pimple to be thrown out spontaneously on the surface of the body without some previous lesion, however slight, either of the solids or the circulating fluids of the general system; else we should have an effect without a cause. In like manner every cutaneous disease, whether arising spontaneously, like *lepra* or *herpes*, or whether resulting from contagion, as *scabies* or *porrigo*, either originally or ultimately involves the constitution, more or less obviously, in the changes which are taking place in the capillary system. As the brain takes cognizance of every disturbance in the extremities of the nerves, so the heart receives and reflects an impression when the minute vessels, however distant from the centre of circulation, become congested or inflamed. In fact, a sympathy exists throughout both systems and in all parts of the frame, so that every part of the body suffers with every member, and each member with the whole body, the local disease, when communicated from without, becoming the cause of the constitutional disturbance, and *vice versa*, the general cachexy, when it exists primarily, becoming, in its turn, the cause of the local affection.

I have been anxious to explain in the outset more fully than many readers may think it to have been necessary, the nature and necessity of this relation, because there are many intelligent practitioners who doubt and deny

the universality of the connection between the local and general, and a still larger number who, admitting it as a general principle, practically ignore it in the treatment of certain forms of local disease. I have, indeed, long ago ventured to publish the opinion that the difficulties attending the treatment of chronic cutaneous diseases, are mainly attributable to neglecting that vigilant attention to the state of the general health which always suggests the most correct indications for treatment. Increasing familiarity with these diseases has abundantly confirmed me in these views, and the chief purport of this paper and others which may follow, is to demonstrate by facts, and illustrate by cases, some of the multiform varieties of disordered health, which oftentimes obscurely complicate, and not seldom originate, cutaneous disease.

The more obvious forms of deranged health which are found associated with eruptions may be classed under the heads of gout, dyspepsia, visceral congestion, plethora, anæmia, neuralgia, scrofula, syphilis, and the like. But more frequently the general disorder is less obvious, though not always less important; and to these more obscure deviations from health (to which the patient himself is often in a great degree a stranger), it will be my special object to entreat attention.

There are few maladies which give more trouble or less satisfaction to the general practitioner than *the various chronic forms of eruption which break out in schools* or other large establishments, the inmates of which partake of the same diet, breathe the same atmosphere, sleep in the same dormitory, observe the same habits, and are engaged in the same pursuits. A large number of children, say ten or twenty out of every hundred, are often found affected with a similar eruption. By cleanliness and attention the disease will often yield to local treatment, but in a short time it returns. Sometimes it assumes the form of scabies, running rapidly into pustules, sometimes of scald-head or ring-worm, sometimes of boils, whitlows or blisters. A theorist, fresh from school, well grounded in rudimentary medical treatises, will tell me that I am confounding together essentially different diseases; that scabies must be cured by sulphur, ring-worm by detergents, boils by poultices, &c.; but experienced practitioners know too well that a faithful and diligent use of these remedies, with due attention to cleanliness, will do little or nothing towards removing these diseases when they occur in schools or large domiciliary establishments. And the first thing to be done towards the treatment is to unlearn the Willanean nosology and diagnosis, to look beneath the surface, and to study the nature and causes of that *vitiated condition of the blood*, which, if it does not originate this endemic pest, renders it at least proof against local treatment and ordinary remedies. In different establishments different causes will be found in operation, and sometimes different seasons will produce a corresponding variation in the form of the disease. Thus the eruption tends one season to vesications, another to pustulation, a third to ulceration. In spring and summer the scalp is most frequently affected; in winter the hands, legs and feet.

Now, this sketch of a common form of skin disease, which must be familiar to every practitioner who has long had the charge of large boarding establishments for children, will serve to illustrate the general prin-

ciples of pathology and treatment which I am anxious to maintain. What is this gregarious cachexy which originates or sustains disease so unlike as scabies and porrigo, and others equally unlike both of them? It will be ascertained, on inquiry, that there is a common cause, and, if this cause be detected and removed, no sulphur will be required for this scabies, no specific for this ring-worm, no special treatment for these other cutaneous diseases. In one case it will be found that sixty or seventy children are sleeping in a large and lofty, but totally unventilated bed-room. In another the diet of the children is ample, but rigorously limited to certain articles of food; no meat is allowed but boiled mutton, and that only once or twice a week. In another the children (girls) are all in plump condition; but they seldom or never leave the establishment, never use their limbs as they were intended to be used, never inhale the country air or gambol in the verdant fields. In a fourth there is excessive attention to cleanliness, too much combing and brushing and scrubbing of the scalp, too much embrocation with coarse yellow soap, fit only to wash floors, too much cold bathing, and consequent want of re-action, blue lips, blue legs and feet, blue hands and arms. All this produces irregular and abnormal action in the exhalants and cutaneous capillaries, and disease follows. Other causes might be alluded to as occasionally occurring, such as exposure of one part of the body to cold or damp, through defect in the costume, insufficient bed-clothes in winter, too warm a garment in summer, insufficient food or drink, *second-rate butchers' meat, flour, butter or potatoes*, abstinence from vinegar, fruit, and other wholesome acids so essential to health, particularly in the summer season; and in almost every boarding establishment, where economy is of importance, there is *too little variety of food*. This last defect has so much to do with skin diseases, and has been so little noticed by authors, that I am tempted to dwell upon it longer than I otherwise should have thought necessary.

Man is an omnivorous animal. This circumstance is both an advantage and a disadvantage. It enables him to sustain life for a short time on almost any kind of aliment, animal or vegetable; but it likewise induces a necessity for a considerable variety of diet, or frequent change, in order that he may retain health and strength for a long time together. Chemistry has not yet detected the reason of this necessity; and as the proximate elements of animal structure are found in bread and water, as well as in milk and various other articles, it does not appear that change should be necessary at all. But it is known to all graziers and feeders of cattle, sheep, and other animals, that change is necessary and salutary for them; and much more is it for man. Patients recover under homœopathic treatment, because a rigorous system of diet is imperatively prescribed. The system is not founded on any science or principles which will bear a moment's examination. The things to be avoided are perfectly harmless and wholesome, but in the very absurdity and strangeness of the diet prescribed consists its value. It is a great *change*. The digestive organs have to pick their aliment out of a new arrangement of the elements which support animal life, and this new work is refreshing. There is more or possibly less defecation required than be-

fore ; there is more or it may be less work given to the kidneys than before. Torpid organs are aroused, wearied organs find repose, blood is supplied with less nervous exhaustion, and the brain participates in the relief and vigor of the whole system. Under these circumstances local disease often finds a spontaneous remedy either in the improved condition of the circulating fluids or in the circulation itself, and the whole mystery of this dietetic cure is nothing but the relief of change, just such a relief as is afforded by change of air, change of habits, change of country, or of pursuits. The want of change in diet is obviously a frequent cause of disease in the skin, where it occurs in large boarding-schools, where the diet is too simple, plain, restricted, and unvarying, to maintain the system in vigorous health for a long time together. Accordingly a change of diet, the more sudden and violent the better, will generally remove the most of the difficulties in the way of recovery ; and if to this be added change of air and change of habits, the muscle of the lower extremities being duly called into exercise as well as of the upper, the mysteries of the case are explained, the inveteracy of the disease is destroyed, and it yields to ordinary treatment, or even to the spontaneous efforts of the system without any medical treatment whatever.—*London Lancet.*

EARLY HISTORY OF THE MEDICAL PROFESSION IN NORFOLK CO.

[Continued from page 179.]

CANTON.

Canton, formerly known as Dorchester village, was settled, and a church organized in it, as early as 1717.

Dr. Belcher was the earliest resident physician ; and tradition has made us better acquainted with his skill in athletic exercises than in professional pursuits. His minister, Rev. Samuel Dunbar, had in his day a great reputation as a mighty wrestler, as well as divine. It is said that although neither the clergyman nor physician was disposed to compromit the dignity of his calling by a public trial of skill, they sometimes retired to a lone spot in the forest, and there, far removed from the public gaze, renewed the sports of their youth.

Dr. George Crossman was the successor of Dr. Belcher. He was many years Town Clerk of Stoughton, before its separation from Canton. He had a good reputation as a physician, and died Sept. 25, 1805, aged 68.

Dr. Samuel Searle, a pupil of Dr. Moses Baker of Randolph, settled as a physician in Canton about the year 1780. After a few years he removed, first to Royalston, then to Canada, where he died.

Dr. Jonathan Stone, a native of Framingham, settled as a physician in Canton about the year 1812 ; and continued to reside there in full practice, and much respected, for more than thirty years. He was a worthy Fellow of the Massachusetts Medical Society. In 1842 he removed to Belleville, Ill., where he is supposed to be still living.

Dr. Moses Baker, a native of Randolph, and son of the physician there of the same name, was in Canton several years, but removed, and

finally went to Monmouth, Me., where, it is understood, he died about twenty years ago.

Dr. Phineas M. Crane, son of Gen. Elijah Crane, after having completed his medical studies, in 1828 settled in his native town, but soon removed to East Boston, his present residence.

STOUGHTON.

The present town of Stoughton was incorporated as a parish in 1744.

Dr. Nathan Bucknam was the first physician. He was probably a son of Rev. Nathan Bucknam, Harvard College 1721. He married a Holmes; died young, and but little is known respecting him.

It is said that a Dr. Pope formerly resided in Stoughton, near to Easton—respecting whom, the only remaining tradition is that he refused medical fees for services rendered on the Sabbath.

Dr. Peter Adams, a native of Stoughton, was son of Rev. Jedediah Adams, Harvard College 1733. He graduated at Harvard College in 1778; was a medical pupil of Dr. Crossman and Dr. E. Wales; and from about 1780 to the time of his death in 1832, was the principal physician of the town. He died at the age of 76, universally respected.

Dr. Simeon Tucker, a native of Canton, and for a short time a practitioner there, who graduated at Brown University in 1821, and at Harvard College M.D. in 1824, succeeded Dr. Adams, and is still a resident in Stoughton in successful practice.

Dr. Charles F. Wyman, a very promising young physician, became associated in business with Dr. Tucker, but having unfortunately contracted "ship fever" in the discharge of professional duty, died of the disease April 30, 1851, at the early age of 27 years. He was universally respected, and his untimely death greatly lamented.

SHARON.

Sharon was incorporated as a town in 1765.

Dr. Lemuel Hewins, a pupil of Dr. Nathaniel White, of Weymouth, whose daughter he married, was probably the first physician there. In early life he had some business, which soon declined, his personal habits being unfavorable to success.

Dr. Elijah Hewins was a pupil of Dr. Young, of Boston, and a surgeon in the Revolutionary army, attached to Col. Jacob Gill's regiment. He had in Sharon, Foxborough, and Walpole an extensive practice for twenty years after the close of the war. He sustained the reputation of an upright man and good physician. His death occurred in 1827, at the age of 80; but some years previously, in consequence of a shock of palsy, he had wholly retired from practice.

Dr. Daniel Stone, who graduated at Harvard College in 1797, and was a medical pupil of Dr. Willard, of Uxbridge, was the next physician. He commenced business in Sharon, in 1800, and continued there in successful practice for more than forty years, enjoying a well-earned reputation as a physician and citizen. From the commencement of his medical life he was on principle a total abstinent from the use of all intoxicating liquors. He was social in his habits, hospitable, a pleasant

companion and a fast friend. He was thrice married, and left a widow with several children to mourn his loss. His death occurred very suddenly, August 27th, 1842, in consequence of the ulceration and rupture of a hernial appendix to the ileum, somewhat resembling the appendix vermiformis.

FOXBOROUGH.

Foxborough constituted originally the caudal extremity of that "serpent that turned her head northward over against Tompson's Island and the Castle." It was incorporated in 1778.

Dr. Joshua Wood appears to have been the earliest resident physician. He was a native of Sharon, a medical pupil of Dr. Elijah Hewins, and had a good reputation as a physician and citizen. He died of pulmonary disease, in 1799, at the age of 47.

Dr. Spencer Pratt, a medical pupil of Dr. Wood, succeeded him, and was for a time successful in acquiring business. He afterwards removed to Franklin, where he died.

Dr. Aaron Everett died in 1807, aged 25.

Dr. William Payson came from Walpole; was a resident in Foxborough; married a daughter of Samuel Warren, Esq., and for several years was the principal physician. He then removed.

Dr. ——— Kingsbury, was a resident here for a short period, but died at an early age.

Dr. ——— Talbot was here for a time, and then removed.

Dr. Gardner M. Peck received the degree of M.D. at Brown University in 1821, settled in Foxborough, and for some years had a wide circle of practice. He then removed to New York, and it is understood relinquished medicine as a profession for more profitable pursuits.

DEDHAM.

Dedham was incorporated in 1636, and originally embraced within its limits the present towns of Dedham, Medfield, Medway, Walpole, Wrentham, Franklin, Bellingham, Needham, Dover, Natick, and a part of Sherborn.

Rev. John Allin, who was settled in 1639, was the first pastor. He had a son Daniel, born in 1656, who graduated at Harvard College in 1675, and was a physician. He was for a time a resident in Boston, and also Librarian to the College, and may have occasionally prescribed for the sick in his native village. He died in 1692.

Dr. William Avery was the earliest educated physician who is known to have taken up his residence in Dedham. He came from England to Boston in 1650, with his wife Mary, and children Mary, William, and Robert. At what period he removed to Dedham, and how long he continued there, is uncertain. In 1680 he had returned to Boston; for in that year he gave £60 to the town of Dedham, describing himself in the deed of gift as of Boston, but sometimes of Dedham. In Judge Samuel Sewall's diary, it is recorded, that he died in Boston, March 18, 1686. His age was 65. A small grave-stone, in the Chapel Burying Ground, marks the place of his interment. He appears to have been well educated; a man of benevolence; and especially a patron of learning. I

have found no evidence that he left a will, but it is known that in his life-time he made liberal donations to various public charities, among which was one to the College at Cambridge.

Dr. Jonathan Avery, son of Dr. William, was born in Boston, it is said, in 1651. This may be a mistake. In his will, dated May, 1691, he describes himself as a resident in Dedham; practitioner in physick, aged about 35 years. His inventory is dated the same month. He left a wife Sybil, and three daughters. There is, among his descendants, a tradition that, being a believer in alchemy, he devoted some of his leisure hours to chemical studies; and that near the place of his former residence, heaps of cinders still remain, the product of his labors. It may be so. But to me it appears quite as probable, that the aforesaid cinders were the product of his brother Robert's blacksmith shop.

Dr. Joseph Richards was born in Dedham April 18, 1701; graduated at Harvard College in 1721; studied medicine as a profession, and settled in his native town. He was a military officer, a magistrate, and a man of respectability; but I cannot learn that he was ever extensively engaged in medical pursuits. He died Feb. 25, 1761, aged 60.

Dr. Nathaniel Ames, a native of Bridgewater, and descendant of William Ames, of Braintree, settled as a physician in Dedham in 1732. He was a shrewd, observing man, endowed with talents much beyond mediocrity; a man of strong passions and a determined will. He was much respected; was often employed in public affairs; and was found equal to every trust committed to him.

In early life he devoted much attention to astronomical studies. In 1725 he commenced the publication of an almanac, which was continued annually while he lived. This publication contained upon its cover a picture of the signs of the zodiac, rather conspicuously displayed, and secured for him among the credulous a great reputation as an astrologer as well as physician. If he did not openly profess skill in *judicial astrology*, he was not the man to disclaim the possession of such skill, when it was imputed to him by the superstition of others. On the birth of his second son, the Hon. Fisher Ames, in reply to the inquiries of a good lady as to the future destiny of the child, after a moment of apparently deep thought, he gravely said—"If he lives, that child will be the third ruler in the kingdom." Truant boys stood in great fear of him, having the impression that he could infallibly detect their roguery. On one occasion, his skill in this line was subjected to a severe test, yet without loss to his reputation. A neighboring hen-roost had been frequently robbed, yet the culprit had as often escaped detection. At length an appeal was made to the art of the astrologer. One evening, when the signs in the heavens were favorable, the boys, and among them the suspected urchin, were assembled in a dark room. The great family dinner pot was placed upon a table in its centre. All the boys were required to form a ring and march silently round this pot; and each one, on arriving at a given point, to touch it with his finger; it being understood that "old chanticleer," who was represented to be within, would respond to the touch of the robber by crowing most lustily. On completing the circle, there was no response; yet the shrewd astrologer,

calling for a light, discovered that the digital extremities of one boy gave no evidence of contact with the enchanted pot; and he, being forthwith pronounced the culprit, made immediate confession of his guilt, and thus the worthy astrologer's fame was fully sustained.

Dr. Ames possessed a great fund of common sense, as well as quiet humor, and was usually found ready for any emergency. Worthington, in his History of Dedham, relates an anecdote illustrative of these traits in his character. It is substantially as follows:—His first wife dying soon after the birth of her first child, and the child itself shortly after its mother, he claimed, that, as heir of his child, he was entitled to certain lands which had descended to her from the Fisher family. These lands, on her decease, having descended to her child, the question arose, whether they should ascend to the father, as heir-at-law of his child, contrary to the rule of common law. The Supreme Court, two judges dissenting, decided that they did so ascend. Dr. Ames, although successful in his suit, expressed his dislike at the conduct of the dissenting judges, one of whom was Chief Justice Dudley, "by causing the whole Court to be painted on the large sign-board of his tavern, sitting in great state in their large wigs, each judge being clearly recognized. An open book was before them, underneath which was written, 'Province Laws.' The dissenting judges were represented with their backs turned towards the book. The Court, hearing of the sign, sent the Sheriff to bring it before them." The doctor, fortunately for himself, became apprised of the order just in time to remove the obnoxious sign before the sheriff's arrival.

Dr. Ames was born July 22, 1708, and died July 11, 1764, aged 56.

Dr. Nathaniel Ames, son of the preceding, was born at Dedham in 1740; graduated at Harvard College 1761; and commenced the practice of medicine in his native town as early as 1764 or 1765. He was considered a judicious physician; but owing to certain eccentricities of character, and to his fondness for political strife, he never acquired a large circle of business. He had some reputation as a scholar, and continued the almanac which his father had commenced some little time after his death. He died July 22, 1822, aged 81.

Dr. Seth Ames, brother of Dr. Nathaniel, Jr., was born in 1743; graduated at Harvard College 1764, and was a surgeon in Col. Read's regiment of the Revolutionary army. He was for a time settled in Amherst, N. H., where he was much respected. On the failure of his health he returned to Dedham, and died there January 1, 1778.

Dr. John Sprague was a distinguished physician in Dedham, and long enjoyed an extensive and lucrative practice. He was born in 1713; graduated at Harvard College in 1737; was a pupil of the celebrated French physician, Dr. Louis Dal Honde, whose daughter he married. He commenced business in Boston, and there continued to reside until after the death of his first wife. He then married Mrs. Esther Harrison, widow of Charles Harrison, Esq., a lady of fortune, and removed to Dedham, where he continued until his death in 1797, at the age of 84.

Dr. Sprague received a good medical education; was endowed with more than a common share of "natural acumen"; and being a very

careful observer of morbid phenomena became eminent among his brethren for his skill in diagnosis.* He possessed the unbounded confidence of his patients. "Unto *him* men gave ear and waited and kept silence at *his* counsel." He was eminently successful in acquiring and retaining business; and, it has been said, not over-scrupulous in exacting a substantial remuneration for his services. He acquired a princely fortune; but it is proper to add, that one of his relatives has assured me, that this wealth was obtained more from the rise of soldiers' claims, which he largely purchased, than from the emoluments of his profession.

Dr. Joseph Sprague, Jr., was son of the preceding. After his graduation in 1772, he studied medicine, partly under the direction of his father, but chiefly in Europe. He resided for a time in Milton, then in Boston, afterwards in Dedham, where he died April 17, 1800, aged 48. His tastes and education were not exactly suited to medical pursuits, and he was never actively engaged in the duties of his profession.

Dr. Jesse Wheaton came from Rhode Island. He was a very worthy man, but received only a limited medical education. In the early part of the present century he had considerable medical business in Dedham, but soon relinquished it for other pursuits. For many years he kept an apothecary's shop in Dedham, and was much respected as a citizen. He died in 1847, aged 84.

Dr. Simeon B. Carpenter, the son of a physician in Rhode Island or the vicinity, graduated at Brown University in 1827, and M.D. at Harvard College in 1830. He settled in Dedham, acquired a good reputation and a fair share of medical business, which he retained until his death in 1843, at the age of 42.

Jeremy Stimson, our late President, is a native of Hopkinton, and son of a physician of the same name. He graduated at Harvard College in 1804, settled in Dedham in 1807, and soon acquired and for forty-five years has sustained the reputation of a scientific and judicious medical adviser. In him the "*suaviter*" and "*fortiter*" are so happily blended, that his services are as much in requisition as ever; and being in the enjoyment of good health, there is a fair prospect that he may serve his generation for years to come in the line of his favorite pursuits.

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* As an instance of the doctor's tact in this line, the following well-authenticated and amusing anecdote may be mentioned. It seemed that his fame had extended beyond the limits of his County. A good woman in the western part of the State, desired to consult him in behalf of her husband, who had received some injury; and, that there might be no collusion, she determined herself to make the journey and see the doctor in person. Accordingly, having provided herself with a phial of the fluid by which his skill was to be tested, she set off on her errand of mercy. On her arrival at Dedham, she espied a man at work in front of a respectable looking house, and inquired if he could inform her where the famous Dr. Sprague lived; adding, that her husband had fallen down stairs, and that she had come to see if the doctor knew as much as people pretended. It happened that the house was the residence of the veritable doctor himself; and that, unperceived, he had overheard the conversation. After the worthy lady had been permitted to wait awhile, the doctor at length appeared; and waving ceremony, she thus accosted him. "Doctor, I have brought some of my husband's water, and I want you to tell me what is the matter with him; and if you can do that, I shall believe you can cure him." The doctor, after due examination, replied, "Madam, I should think that your husband has received an injury by falling down stairs." "I never!"—exclaimed the woman. "But—doctor—*how many flights* of stairs?" This question had not been anticipated, and he answered at random, "Two, madam." "Ah, doctor," she said, "it was three—from garret to cellar."—"But, madam," responded the doctor, "did you bring *all* the water?" "I confess I did not." "Then, madam, you have left *one* flight of stairs at home." She was perfectly satisfied, and went away astonished at a manifestation of wisdom quite beyond her power of comprehension.

Dr. Danforth Phipps Wight was the son of Rev. Ebenezer Wight, formerly pastor of the Hollis-street Church in Boston. He was born at Dedham, February 8, 1792; graduated at Harvard College in 1815, and M.D. in 1819. He commenced business at Sandwich, but has for some years resided in his native town, where he is universally respected.

In South Dedham Dr. Philip Draper, Harvard College 1780, is supposed to have been the earliest resident physician. His time was not exclusively devoted to medical pursuits. At one period he was engaged in teaching; and for a time resided in Dorchester. He died in 1817, aged 60.

Dr. Ephraim French, a native of Randolph, went to South Dedham in 1814, but died the same year of a pulmonary complaint.

Dr. Elisha Thayer, author of Thayer's Memorial, succeeded him, and remained a few years. He then removed to Dedham Centre, where for many years his time has been chiefly occupied with his duties as Postmaster.

Dr. John Kingsbury Briggs was the son of Rev. Ephraim Briggs, of Halifax. He studied medicine under the direction of Dr. Arad Thompson of Middleborough, and Dr. William Ingalls of Boston. In 1820, he received the degree of M.D. at Brown University. He settled in South Dedham soon after his graduation, and there for more than twenty years had the reputation of a worthy and successful physician. He was, for a considerable period, the subject of occasional pulmonary hemorrhage, which finally resulted in fatal disease, which terminated his life December 26, 1843, at the age of 49.

In West Dedham, with the exception of Dr. Francis Howe, the present incumbent, it is believed that no physician has ever taken up a permanent residence. He is a native of Framingham, born in 1787, studied medicine with Dr. John B. Kittredge, with whom he was for a time associated. In 1814 he took up his residence in West Dedham, and has continued there to the present time.

[To be continued.]

CUMULATIVE EFFECTS OF DIGITALIS.

[Communicated for the Boston Medical and Surgical Journal.]

In Pereira's Materia Medica, Vol. II., p. 299, we find the following remarks on the use of digitalis.

"A most important fact connected with the repeated use of small doses of it, is the *cumulative effect* sometimes observed. It has not unfrequently happened, that in consequence of the continued use of this medicine, very dangerous symptoms, in some cases terminating in death, have occurred.

"The most prominent of these were great depression of the vascular system, giddiness, want of sleep, convulsions, and sometimes nausea and vomiting. A knowledge of its occasional occurrence impresses us with the necessity of exercising great caution in the use of this remedy, particularly with respect to the continuance of its administration and in-

crease of dose; and it shows that after the constitutional effect has become obvious, it is prudent to suspend from time to time the exhibition of the remedy, in order to guard against the effects of this alarming accumulation."

The patient, in the following case, a lad about 8 or 9 years of age, had been laboring under scarlatina of the anginose variety, attended with great disorder of the throat, and finally suppuration of the parotid glands with profuse discharge of pus; and had been treated with the usual antiphlogistic course.

Convalescence was interrupted by the not unusual appearance of ascites and anasarca. These unpleasant symptoms were treated with mild purgatives, spt. nit. ether, and for two or three days the administration of gr. jss. pulv. digitalis every six hours, to promote absorption, and increase the renal secretion; both of which objects were promptly attained.

The digitalis had been suspended for forty-eight hours, and the patient considered safe, when I was called in great haste, as he was thought to be dying. I found him in a comatose state, with coldness of the extremities, great prostration, and, when roused, evident disorder of vision and a peculiar oscillating movement of the eyes. He complained of pulsating frontal headache, had some nausea and vomiting, and profuse diuresis. He had frequent epileptic convulsions, during which the muscular contractions seemed to correspond with the oscillating movement of the eyes. The pupils were dilated, but still sensitive to the effects of light. The pulse was not much reduced in frequency, but somewhat irregular.

Under these circumstances my venerable friends, Drs. Socrates Smith and Hasseltine, were called in consultation. We administered antispasmodics and anodynes, applied sinapisms to the spine and extremities, and cold on the head. Although the little patient at times seemed *in articulo mortis*, the symptoms gradually abated, and in the course of a few days quite disappeared. After this the convalescence was uninterrupted.

It is earnestly hoped that some of the profession, who may have had experience in similar cases, will attempt the solution of the following queries:—

1st. Were the above unpleasant symptoms the *cumulative effects* of the digitalis, not a grain of which had been administered within forty-eight hours of their occurrence?

2d. Do we possess any *antidote* to its effects?

Rush, N. Y., Sept. 27th, 1853. C. B. Galentine.

DEATH OF JUSSIEU.

To the necrological record of this year, which already includes so many scientific celebrities, must be added a name which has been illustrious for two centuries. Adrien de Jussieu, the fifth of that scientific dynasty, which commenced under the reign of Louis XIV., with Bernard de Jussieu, who laid down the principles of the *natural method* in botany, and Antoine Laurent de Jussieu, who established this system on an im-

perishable basis; Adrien de Jussieu, the celebrated botanist, the President of the Institute of France, died on the 20th of June. "I have heard," says M. Ampere, in an obituary notice, which we find in the Journal des Debats, "I have heard the botanists of England, of Germany, of Italy, express their profound admiration for the writings of Jussieu, who has found means to add to the glory of his illustrious name. When I met Asa Gray, the eminent American botanist, he was carrying home with him, in preference to any other, the portrait of this savant, whose loss will be as acutely felt at Boston as at Paris. Such suffrages are a prouder homage than any eulogy of mine."—*Virginia Medical and Surgical Journal.*

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, OCTOBER 5, 1853.

Dr. Williams of Deerfield, and the Franklin District Medical Society.—We have already alluded to the complimentary proceedings of the Franklin County Society, on the occasion of the resignation of its president, Dr. S. W. Williams. Dr. W. is so well known and so much respected in this his native State, that on his removal from among us it seems highly proper that the proceedings referred to should be fully recorded in the Journal, and we take pleasure in giving them below:

The President, Dr. Williams, on taking the chair, announced his intention to withdraw his connection from the Society, in consequence of the contemplated removal of his residence, whereupon the following preamble and resolutions were unanimously passed:—

Whereas the Fellows of this Society have heard with regret the determination of Dr. Williams, just expressed, therefore

Resolved, That we cordially recommend him to the favorable notice of all kindred bodies, as an exemplary associate; and to the public, as a competent physician and surgeon, well versed in the principles of science and learning, and a gentleman of unimpeachable character.

Resolved, That this Society express its regard for Dr. Williams by presenting him a gold watch.

Resolved, That he be requested to give to this Society a sketch of his professional life.

Agreeably to the second resolution a fine gold watch was presented Dr. Williams by Dr. J. Deane, accompanied by the following remarks:

"Sir:—In behalf of the Fellows of this Society I present you this gold watch as an expression of our regard for your character as a gentleman and physician. By your varied attainments in learning and science, and by your urbanity and punctilious decorum, you have ever won our confidence and respect, and it cannot but be gratifying to you to know that in all the intimate relations that have so long and so uninterruptedly existed between us, we have never entertained a suspicion of your integrity or your honor. It is therefore with sincere regret on our part that these relations are to be severed; but in going from us, you will unquestionably bear with you our fraternal sympathies and good will. Through the remainder of your useful life, do not doubt that these friends will, while they live, cherish your memory

and exult in your prosperity. With these sentiments we offer you this parting gift, with the hope that it may measure to you many years of health and happiness and honorable age."

The reply of Dr. Williams was as follows:

"Gentlemen:—I can scarcely give utterance to my feelings for the elegant gift of this gold watch as a parting token of your affection, and for the flattering expressions of your regard for me. Next to the approbation of God and my conscience, is that of my professional brethren, for, in the language of Burton, 'none but a physician can judge with regard to the qualifications of a medical man.'

"When I shall look upon this acceptable present,—and it will be my constant companion,—it will not only remind me of the rapid flight of time, but also of your endearing friendship which I can never forget. With most of the Fellows of this Society I have long been on terms of intimacy, and I trust we shall part with mutual good will. My warmest thanks are due to you all for the distinguished honors you have conferred upon me, and for the confidence with which you have accepted my counsels and advice.

"This Society is dear to my heart. For many years I have exerted myself to establish it, and it affords me the highest pleasure to know that I leave it in the keeping of gentlemen who will honor it and themselves by their fidelity to it.

"From early life I have been devoted to the profession of medicine, and my love for it has been unquenchable; I early put on the professional armor, and have labored unceasingly and I hope not unsuccessfully. I shall yet wear it (and perchance die in it) on the lovely prairies of the West, and I shall look back upon your friendship with unmingled satisfaction and delight. In tearing myself away from my beautiful native town where I have resided more than sixty years, I feel that the ligaments of my heart are broken; but the calls of duty urge me, and they are imperious."

In accordance with the last resolution, Dr. Williams gave a highly interesting account of his professional career, a copy of which was solicited for the archives of the Society.

The usual address was delivered by Dr. Cooke of Wendell, which was received with zest and instruction and with the thanks of the Fellows. His subject was *Medical Delusions*.

The meeting was closed by a discussion on Dysentery, in which most of the Fellows participated, and was followed by a very excellent dinner served with taste and attention by the gentlemanly proprietor of the Shelburne Falls House. After requesting the editors of the Boston Medical and Surgical Journal and of the Greenfield papers to publish these proceedings, the Fellows separated, delighted with their interview, not forgetting, however, that it was the last at which the venerable President would preside.

The watch was a heavy, full jewelled English lever, of the value of $100, and was purchased of Mr. Josiah Day. It bore upon its outside the following inscription:

STEPHEN WEST WILLIAMS, M.D.
President
Franklin Dist. Med. Society.
From the Fellows,
Sept. 7,
1853.

Diseases of the Heart.—Those who keep up with the current medical literature of the day, will recollect a series of clinical lectures by Dr. Bellingham, of St. Vincent's Hospital, in the Dublin Medical Press and the London Medical Gazette, where they appeared as they were delivered. They were so well received by medical men at the time, that the author was induced to revise his labors, append new matter, and bring out a separate work. As mentioned last week, the treatise is divided into two parts, the first of which only has been received. Very full descriptions are contained in it of the healthy heart, in every condition in which it has been examined, including its size, weight and capacity, its motions, sounds, &c. Then follows physical signs, accompanied by practical observations on auscultation. Dr. Bellingham is also very instructive in regard to the examination of the heart in disease. Its impulse, turgescence, pulsation of the jugular veins, fremissement cataire, signs furnished by percussion, &c., are most carefully noted. Alterations of the normal sounds, pericardial friction, endocardial murmurs, sawing, filing and grating valvular sounds, together with venous and arterial murmurs, are very distinctly explained. One of the chapters treats of palpitations, epigastric pulsations, angina pectoris, and the pulse in cardiac disease; another refers to secondary symptoms of cardiac disease; and the 9th and last enters upon the causes, progress and termination of diseases of the heart. We have been thus particular in showing the materials that constitute this elegant octavo of 252 pages, from the press of Faunin & Co., Dublin, as in no country is the human heart put to harder service, than in the commercial cities of the United States. The intense excitement to which commercial men are subjected, superadded to the hot-haste temperaments of so many of the business people, who are impatient to be rich, often leads to a derangement of the functions of the heart. From the difficulty of acting directly upon the seat of the disease, medication is worse than nothing, without an accurate knowledge of its structure, and its action in sickness as well as in health; and hence we are desirous that physicians every where should have the benefit of this excellent production.

Spermatorrhœa Rings.—Quite a revolution has been effected in New England, in less than a year, by the use of a mechanical invention, instead of medication, in the treatment of a formidable malady. Heretofore, tonics, accompanied by a long series of auxiliary assistants, such as jaunts, horseback, sea bathing, a regulated diet, besides innumerable preparations of drugs, have been prescribed to arrest the effects of spermatorrhœa, but rarely with any permanent success. It is a condition resulting, in most instances, from the indulgence of a pernicious vice. In prisons, self-pollution is nearly universal, and no ingenuity on the part of wardens or attending physicians has prevented it for any length of time. Some suffer intensely, and even die, from excessive indulgence in this vice. Schools, too, and colleges, are often the nurseries of this degrading habit, which carries many young men to an early grave, often without the true cause being suspected. The weak eyes and continued headaches so common among students at public institutions might in many instances be traced, if effort was made in the right direction, to this perpetual violation of a physiological law. The rings, which this Journal was the first to announce, are a sure remedy for involuntary forms of the disease. Physicians are eminently successful with them. In the State Prison at Charlestown, where Dr. Bemis has given them a thorough trial, we understand they have performed many cures.

In private practice, also, testimony from the most reliable sources might be cited to strengthen the medical public's confidence in this simple and only effectual relief in these cases. Dr. Cheever has shown us another improvement of the instrument. It is far lighter than the former patterns, and the middle ring is better balanced in the centre of the large one. The simplicity of the adjustment to any sized organ, makes it more economical, too, which is a consideration not to be overlooked. We admire the ingenuity displayed in the manufacture, and predict, from the great success that marks their application to severe and long-protracted cases of individual suffering, that the rings will be very extensively used in other parts of the world as well as in America.

Medical College Circulars.—These are coming in pretty freely—and among them we discover several new medical schools, showing that it is becoming quite a business to create these institutions. All of the old, established colleges, excepting the one at Geneva, N. Y., are well prepared for the coming lecture season. Among the number is our Massachusetts Medical College, and the school connected with Yale College in Connecticut. Neither of these make any showy pretensions, but both are sound and thorough, and have the confidence of the public. At Baltimore, the Dental College is always on the gain. The new building possesses superior advantages, and students will have better accommodations than in any former year. From appearances the strife for patronage will be active among competing schools, and a larger number will be in attendance than at any former session.

Contagiousness of Yellow Fever.—Meeting a medical gentleman of this city, the other evening, he remarked that it was rumored the Medical Journal had adopted the old exploded doctrine of the contagiousness of yellow fever, which every reputable physician in America, and for aught he knew to the contrary, in other countries, had set his face against long ago. He misapprehended the character of the article which gave rise to the remark. We said, and we now repeat it, that throughout Europe, and certainly in every municipal corporation in the United States, no regard whatever is paid to the opinions of physicians on this subject. The people pursue a course that experience demonstrates to them to be necessary to protect themselves, and secure the public health, in direct opposition to learned theories and high professional authority. We are deeply mortified at this lack of confidence in professional judgment. Last week the physician of the quarantine establishment in Philadelphia, together with the quarantine officer, were indicted, or prosecuted, we are not certain which, for permitting a vessel to go up to the city that was considered infectious, by which means the yellow fever was introduced, causing the death of several persons. This proceeding, by the public authorities, will give the medical gentlemen of Philadelphia an opportunity to show their philanthropy in saving a brother from an unrighteous persecution, while they can at the same time, if ever, prove the truth of the doctrine of non-contagion. With a mighty array of medical talent on his side in the acknowledged medical centre of the Union, if Dr. Stokes is broken down and loses his office for practising according to the doctrines taught by the faculty, it will be an additional proof at least of the unpopularity of the doctrine. The facts at New Orleans, on the Mississippi River, at Havana, and in South America, seem also to be arrayed against it.

Yellow Fever in Mobile.—The first report was made by the Board of Health in this city on the 20th of August, and during the twenty-five days from that day to the 13th of September inclusive, it numbered 491 victims. Another statement, which includes cases which occurred before the official report commenced, and extends to the 16th of September, makes the number of deaths by yellow fever from the 1st of August to the latter date. 611. The population left in the city was estimated at from 5000 to 7000, making the mortality very great.—*New York Medical Times.*

Medical Miscellany.—The editor of the American Whig, at Taunton, copies the article from this Journal on Perpetual Thirst, and says "*We have seen Mr. Webb put a gallon of water away at one draught.*"—Cholera is extending in Berlin, Prussia.—The sixth annual circular and report of the Female Medical College of New England, has been published.—Smallpox is evidently springing up at several points in the country. Why will the people hazard their lives, and so many throw themselves into the arms of death, when there is a perfect, easy and certain protection.—A child in Somerset, Conn., lately died from eating colored candy.—Dr. M. H. Gray is candidate for the mayoralty of San Francisco.—Dr. Stokes, the Quarantine Physician of Philadelphia, is likely to have some difficulty with the city authorities, on account of allowing a vessel to go up to the town, which carried disease. —Dr. Wm. C. Lane is the delegate elected to Congress from New Mexico. —Dr. Curtis, editor of the Physico-medical Recorder, Cincinnati, offers, as an inducement to subscribe for his Journal, to send a lithographic profile of himself, at one dollar.—Dr. William Wheeler has been elevated to be chief of the naval bureau of medicine and surgery.—Dr. Kelly is about resigning his office as one of the physicians at Blackwell's Island Penitentiary, N. Y. A fine opening is thus made for applicants.—Dr. T. J. Trundle, of Union, Boone Co., Ky., has been arrested, accused of kidnapping slaves.—The Geneva Medical College, in western New York, is said to have died a natural death, only seven students appearing when the lectures were to commence.—Dr. Wm. Hunter, now in prison at Camden, N. J., is accused of having four wives. Report says he has had as many as twenty in different parts of the country, and yet he is but 28 years old.—The class of students at the old and popular Medical College at Albany, is said to be larger than at any former period.

To CORRESPONDENTS.—Papers have been received on—Medical Matters in Minnesota Territory; Artificial Limbs; and Galvanic Supporters.

DIED,—At South Boston, Dr. D. M'Gowan.—In California, Dr. Wm. K. Reese, killed by the Indians.—In New York, Dr. Osborn, in consequence of being attacked by a gang of rowdies in the street.—Dr. Griffiths, Assistant Surgeon of the 16th U. S. Regiment.—At Churchville, N. Y., Dr. George C. Howard, by suicide, aged 40. He leaped from a bridge.

Deaths in Boston for the week ending Saturday noon, Oct. 1st, 110. Males, 59—females, 51· Accidents, 5—apoplexy, 1—inflammation of the bowels, 3—disease of the bowels, 2—consumption 16—convulsions, 2—cholera infantum, 7—croup, 6—dysentery, 17—dropsy, 4—dropsy in the head, 3—drowned, 1—infantile diseases, 5—puerperal, 2—exhaustion, 1—erysipelas, 1—fever, 2—hooping cough, 3—disease of the heart, 3—hemorrhage, 1—inflammation of the lungs, 3—marasmus, 2 —measles, 1—old age, 2—peritonitis, 1—palsy, 1—pleurisy, 1—scrofula, 1—syphilis, 4—teething, 8—unknown, 3— worms, 1.

Under 5 years, 49—between 5 and 20 years, 9—between 20 and 40 years, 31—between 40 and 60 years, 9—above 60 years, 12. Born in the United States, 67—Ireland, 30—British Provinces, 2 —England, 3—Sweden, 3—Germany, 3—Azores, 1—West Indies, 1. The above includes 10 deaths at the City Institutions.

CASTLETON MEDICAL COLLEGE.—There will be annually *two* full Courses of Lectures in this Institution; the *Spring Session* commencing on the last Thursday in February, the *Autumnal Session* commencing on the first Thursday in August. Each course will continue four months, under the direction of the following faculty.

JOSEPH PERKINS, M.D., Prof. of Materia Medica and Obstetrics.

EZRA S. CARR, M.D., Prof. of Chemistry, and Natural History.

WILLIAM SWEETSER, M.D., Prof. of Theory and Practice of Medicine.

MIDDLETON GOLDSMITH, M.D., Prof. of Surgery.

WILLIAM C. KITTRIDGE, A.M., Prof. of Medical Jurisprudence.

CORYDON LA FORD, M.D., Prof. of Anatomy and Physiology.

ADRIAN T. WOODWARD, M.D., Demonstrator of Anatomy.

Fees.—For each full Course of Lectures, $50. For those who have attended two full Courses at other Medical Colleges, $40. Matriculation, $5. Graduation, $15. Board, including the expenses of room, fuel and lights, can be obtained in respectable houses at from $1,75 to $2,50 per week.

Castleton is accessible from Albany, via White Hall, and from Boston and Burlington via Rutland, by Railroads. E. S. CARR, M.D., *Registrar.*

Castleton, Vt., June 1, 1853. jy6—ewIAcowtf

UNIVERSITY OF NEW YORK. MEDICAL DEPARTMENT.—The lectures in this department will commence on Monday, the 17th of October, and terminate on the last day of February.

VALENTINE MOTT, M.D., LL.D., Emeritus Prof. of Surgery and Surgical Anatomy, and Ex-President of the Faculty.

MARTYN PAINE, M.D., Prof. of Materia Medica and Therapeutics.

GUNNING S. BEDFORD, M.D., Prof. of Obstetrics, the Diseases of Women and Children, and Clinical Midwifery.

JOHN W. DRAPER, M.D., Prof. of Chemistry and Physiology.

ALFRED C. POST, M.D., Prof. of the Principles and Operations of Surgery, with Surgical and Pathological Anatomy.

WILLIAM H. VAN BUREN, M.D., Prof. of General and Descriptive Anatomy.

JOHN A. SWETT, M.D., Prof. of the Institutes and Practice of Medicine.

WILLIAM DARLING, M.D., Demonstrator of Anatomy.

GEORGE A. PETERS, M.D., Prosector to the Prof. of Surgery.

ALEX. B. MOTT, M.D., Prosector to the Emeritus Prof. of Surgery.

JOHN W. DRAPER, M.D., President of the Faculty.

The fee for the Lectures is $105. Matriculation, $5. Graduation, $30. The dissecting room will be open from Oct. 1st, fee $5. There will be five Clinques every week. Board from $2 50 to $3 per week.

Letters may be addressed to Professor DRAPER, President of the Medical Faculty, University, New York. Aug. 10—10t

NEW HAVEN MEDICAL SCHOOL FOR PRIVATE INSTRUCTION.—The first term will commence the first week in March, and close the last of July. The second will correspond with the Lecture Term of the Medical Institution of Yale College, beginning the last week in September and continuing four months.

JONATHAN KNIGHT, M.D., *President*
S. G. HUBBARD, M.D., *Treasurer.*
W. HOOKER, M.D., *Sec'ry.*

INSTRUCTERS.

JONATHAN KNIGHT, M.D., Institutes of Surgery.
CHAS. HOOKER, M.D., Anatomy and Physiology.
HENRY BRONSON, M.D., Materia Medica.
NATHAN B. IVES, M.D., Midwifery and Diseases of Females.
WORTHINGTON HOOKER, M.D., Theory and Practice of Medicine and Diseases of Children.
PLINY A. JEWETT, M.D., Surgery.
STEPHEN G. HUBBARD, M.D., Pathology and Medical Jurisprudence.

Fees—to be paid in advance—For the Summer Term, $40; Winter Term, $10; for the Year, $50.
New Haven, Feb. 25, 1853. mch 2—eow

SYRUP IODIDE OF IRON—Manufactured and sold by PHILBRICK, ATWOOD & CO., Chemists, 160 Washington st, Boston. sep. 7

UNIVERSITY OF NASHVILLE, MEDICAL DEPARTMENT.—The third Annual Course of Lectures in this Department will commence on Tuesday, the first of November next, and continue till the first of the ensuing March.

PAUL F. EVE, M.D., Principles and Practice of Surgery.

JOHN M. WATSON, M.D., Obstetrics and the Diseases of Women and Children.

A. H. BUCHANAN, M.D., Surgical and Pathological Anatomy and Physiology.

W. K. BOWLING, M.D., Institutes and Practice of Medicine.

C. K. WINSTON, M.D., Materia Medica and Medical Jurisprudence.

ROBERT M. PORTER, M.D., General and Special Anatomy.

J. BERRIEN LINDSLEY, M.D., Chemistry and Pharmacy.

WILLIAM T. BRIGGS, M.D., Demonstrator of Anatomy.

The Anatomical rooms will be opened for students, on the first Monday of October.

A full *Preliminary course* of Lectures will be given by the Professors, commencing also on the first Monday of October

The Students will have free access to the State Hospital.

Fee of each Professor, $15. Matriculation ticket, $5. Dissecting ticket, $10. Graduation fee, $25. Good board can be obtained in the city at from $2 50 to $3 per week. Further information may be obtained by addressing

J. B. LINDSLEY, M.D., *Dean.*
Nashville, Tenn., June, 1853. je22—tnov.

MEDICAL DEPARTMENT OF THE ST. LOUIS UNIVERSITY.—The regular Lectures in this Institution will commence on the first day of November next, and continue until March ensuing. A preliminary course at the College, as also Clinical lectures at the Hospitals and Dispensary, will be delivered without extra charge, during the month of October.

M. L. LINTON, M.D., Prof. of the Principles and Practice of Medicine.

A. LITTON, M.D., Prof. of Chemistry and Pharmacy.

CHARLES A. POPE, M.D., Prof. of the Principles and Operations of Surgery, and Clinical Surgery.

M. M. PALLEN, M.D., Prof. of Obstetrics and the Diseases of Women and Children.

R. S. HOLMES, M.D., Prof. of Physiology and Medical Jurisprudence.

W. M. MCPHEETERS, M.D., Prof. of Materia Medica and Therapeutics.

CHARLES W. STEVENS, M.D., Prof. of General, Descriptive and Surgical Anatomy.

J. B. JOHNSON, M.D., Prof. of Clinical Medicine and Pathological Anatomy.

E. F. SMITH, M.D., Demonstrator of Anatomy.

The most ample opportunities for clinical instruction, both in medicine and surgery, are afforded free of charge in the St. Louis Hospital, as also in the City Hospital, the marine wards and the O'Fallon Dispensary. This last charity alone presented two thousand cases during the past session. Anatomical material in great abundance.

Fees—for the entire course, $105. Matriculation ticket paid but once, $5. Dissecting ticket, $10. Hospital tickets gratuitous. Board from $10 to $12 per month.

Students or others, desiring further information, can either address the Dean, and he will forward them a descriptive pamphlet, or on arriving in the city, call upon him at his office, 123 Locust street, three doors in rear of Odd Fellows' Hall; or on the Janitor, at the College, corner of Seventh and Myrtle streets. CHAS. A. POPE, M.D., *Dean.*
St. Louis, July, 1853. a17—t

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